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TO:	FROM:
Whom it May Concern	F. Jason Far-hadian, Esq.
COMPANY:	DATE:
USPTO	SEPTEMBER 2, 2005
FAX NUMBER:	TOTAL NO. OF PAGES INCLUDING COVER:
(571) 273 - 8300	- 3 -
PHONE NUMBER:	SENDER'S REFERENCE NUMBER:
RE:	YOUR REFERENCE NUMBER:
POA for 10/664,390	

☐ URGENT ☒ FOR REVIEW ☐ PLEASE COMMENT ☐ PLEASE REPLY ☐ PLEASE RECYCLE

NOTES/COMMENTS:

Please see copy of POA for entry into Private File.

Thanks.

Applicant's File Reference. 1005-2-01 USP

IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

In re application of: IXI Mobile (R&D) LTD. Amit Heller	For: Billing and Ordering System and Method for Services Provided over Communication Networks	Authorized Officer: Kimberly White
Application No: 10/664,390	Filing Date: September 17, 2003	Art Unit: 3629

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SEP 07 2005

United States Patent and Trademark Office
Commissioner for Patents
PO Box 1450
Alexandria, VA 22313-1450


Dear Sir:

Enclosed herewith is a copy of the Power of Attorney for Patent Application Number 10/664,390. Pursuant to the suggestion of Charles Welch at the USPTO Patent Electronic Business Center, we are resubmitting the POA form.

While the POA had been previously filed, it has not been recorded. Currently, the above-referenced application does not appear under my customer number (42698) in Private Pair and I would like to remedy the situation as soon as possible. Please acknowledge receipt of this request.

Thank you for your assistance in this matter.

Respectfully submitted,



For IXI Mobile, Ziv Haparnas CTO
F. Jason Far-hadian

Date: September 2, 2005

PATENT (U.S.A.)
ATTORNEY'S DOCKET NO. 1005-2-01 USF

DECLARATION and POWER OF ATTORNEY

☒ ORIGINAL
☐ CONTINUATION-IN-PART
☐ DIVISIONAL

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SEP 07 2005

As a below named inventor, I declare that the information given herein is true, that I believe that I am the original, first and sole inventor (if only one name is listed as 1 below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

Billing and Ordering System and Method for Services Provided Over Communications Networks

the specification of which is attached hereto unless the following box is checked:

☐ Was filed on _____ as United States Application Number or PCT International Application Number _____ and was amended on _____

My residence, post office address and citizenship are as stated below next to my name. I acknowledge my duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations § 1.56(a). I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above. I hereby claim foreign priority benefits under Title 36, United States Code, § 119 CPT 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT International application which designated at least one country other than the United States of America, listed below and have also identified below any foreign application for patent or inventor's certificate, or any PCT International application having a filing date before that of the application on which priority is claimed:

PRIOR FOREIGN APPLICATION(S)

COUNTRY	APPLICATION NUMBER	DATE OF FILING Month Day Year	PRIORITY CLAIMED UNDER 35 U.S.C. 119
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I hereby claim the benefit under Title 35, United States Code, § 120 of any United States application(s) listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States application in the manner provided by the first paragraph of Title 35, United States Code § 112, I acknowledge the duty to disclose material information as defined in Title 37, Code of Federal Regulations, § 1.66(a) which occurred between the filing date of the prior application and the national or PCT International filing date of this application.

(Application Serial No.)

(Filing Date)

(Status)

POWER OF ATTORNEY: As a named inventor, I hereby appoint the following attorney(s) and/or Agent(s) to prosecute this application and transact all business in the Patent and Trademark Office connected therewith.

R. JASON FAR-HADIAN, REG. NO. 42,622; JONATHAN Y. KANG, REG. NO. 38,182; AMIT S. SHETH, REG. NO. 80,178

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(Please Print)

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2	Name of Inventor Ziv Haparnas	Residence: CITY Tel Aviv	STATE or COUNTRY ISRAEL
	Mailing Address 5 Hargrave Street Tel Aviv ISRAEL 60108		CITIZENSHIP ISRAEL
3	Name of Inventor	Residence: CITY	STATE or COUNTRY
	Mailing Address		CITIZENSHIP
4	Name of Inventor	Residence: CITY	STATE or COUNTRY
	Mailing Address		CITIZENSHIP

I further declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under Section 1001 of Title 18 of the United States Code, and that such willful false statements may jeopardize the validity of the application or any patent issuing thereon.

SIGNATURE OF INVENTOR 1 (Amit Meher)	SIGNATURE OF INVENTOR 2 (Ziv Haparnas)
DATE: September 6, 2005	DATE: September 6, 2005
SIGNATURE OF INVENTOR 3	SIGNATURE OF INVENTOR 4
DATE	DATE